

# Work Order ID 113710

February-24-14 10:01:57 AM

\*113710\*

Page 1

Item ID: D3217-3 Accept \*N9000040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Cable 80.5"  
 Start Date: 2/24/14 Start Qty: 4.00 \*4\* Cust Item ID:  
 Required Date: 2/24/14 Req'd Qty: 4.00 \*4\* Customer:  
 Reference:

Approvals: Process Plan: MLJ Date: 14-02-25 Tooling: Date: Run Start \*NR1\*  
 QC: Date: SPC (Y/N): Date: Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3217	Rev C								

100 PURCHASING 0.00  
 \*100\*  
 Purchasing Memo 0.00  
 Purchasing Issue P/O: 23187 for P/N: 173-VTT-4-80.5 Cable Possible  
 Supplier: Commercial truck equipment Certificate of Conformity is required

CL 14/02/28 4

110 Receive & Inspect for Damage & Mat'l Certs 0.00  
 \*110\*  
 Packaging Memo 0.00  
 Packaging Ensure certificate of conformity is attached

14/3/14 (4)

120 QC6- Inspect dimensions to drawing 0.00  
 \*120\*  
 QC Memo 0.00  
 Quality Control

DAS  
27  
9-89  
4/3/17

4

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE



QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
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**Work Order ID 113710**

February-24-14 10:01:57 AM

**\*113710\***

Page 2

Item ID: D3217-3

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Cable 80.5"

Start Date: 2/24/14 Start Qty: 4.00

**\*4\***

Cust Item ID:

Required Date: 2/24/14 Req'd Qty: 4.00

**\*4\***

Customer:

Reference:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

Identify as per dwg & Stock Location: 81223 0.00**\*130\***

Packaging

Memo

0.00

Packaging

4x 74-3-17 **DAS**  
**26**  
**9-89**

140

QC21- Final Inspection - Work Order Release

0.00

**\*140\***

QC

Memo

0.00

Quality Control

14-03-1814-03-17

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE



QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Doc/Data									
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Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Picklist Print

February-24-14 10:01:57 AM

Page 1

Work Order ID: 113710

**\*113710\***

Parent Item: D3217-3

**\*D3217-3\***

Parent Item Name: Cable 80.5"

Start Date: 2/24/14

Required Date: 2/24/14

Start Qty: 4.00

Required Qty: 4.00

**Comments:**

IPP A04.11.18New issueKJ/JLM

IPP Rev:B 08-10-07 revC as per dwg DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
173-VTT-4-80.5		Purchased	No			110	Each	0.0000	1	4			

**\*173-VTT-4-80 5\***

Cable

**\*\***

14/3/14 (4)



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO23187**

Purchase Order Date 2/28/2014

PO Print Date 2/28/2014

Page Number 1 of 1

**Order From :**

VC-DAN001

**Ship To :** DART AEROSPACE LTD

COMMERCIAL TRUCK EQUIPMENT  
9475 - 192 STREET  
SURREY, BC V4N 3R7  
CA

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

6/14/2013

**Contact Name**

**Vendor Phone** 604 888 0513

**Ship To Contact**

**Ship To Phone**

**Ship Via:** Purolator ground collect

**Ship Acct:**

**Buyer**

Chantal Lavoie

**Customer POID**

**Customer Tax #**

10127-2607

**Terms**

Net 30

**Currency**

CAD

**FOB**

Destination-Collect

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
1	173-VTT-4-80.5	Cable	3/7/2014 Yes 3/7/2014		4.00 Each	\$60.02	\$240.08
	AS PER DWG D3217 REV. C B113710						

**Line Total:** \$240.08

2	71401-45	PROCUREMENT QUALITY CLAUSES	3/7/2014 No 3/7/2014		1.00	\$0.00	\$0.00
	PROCUREMENT QUALITY CLAUSES A005 RIGHT OF ENTRY A016 PERSONNEL QUALIFICATION A025 CERTIFICATE OF CONFORMANCE A040 NOTIFICATION OF QUALITY ESCAPE A042 DART NOTIFICATION BY SUPPLIER A043 RETENTION OF QUALITY DOCUMENT						

**Line Total:** \$0.00

**PO Total:** \$240.08

*CYMB*

Note: Terms & Condition of Purchasing(Suppliers) and Procurement Quality Clauses are an integral part of our AS9100 requirements. To learn in detail, please visit [www.dartaerospace.com](http://www.dartaerospace.com) for further explanation.

Change Nbr: 1

Change Date: 2/28/2014

# COMMERCIAL

TRUCK EQUIPMENT CO.

Invoice: 7187550  
Order Date: 03/10/14  
Inv Date: 03/10/14

PAGE: 1

Bill to: 711688  
DART AEROSPACE LTD.  
1270 ABERDEEN STREET

HAWKESBURY ON K6A 1K7

Ship to:  
DART AEROSPACE LTD.  
1270 ABERDEEN STREET

HAWKESBURY, ON K6A 1K7

PH: 613-632-5200

P.O.# 23187

PST#

VIA PUR #7684382

REP# 999 ORD TKR: PNA

Ordered	Shipped	B/O	Description	BIN	Price	Price Ext.
4.00 EA	4.00	0.00	173-VTT-4-84 PUSH PULL CABLE		60.02	240.08

Now open Saturday 7:30 am to 2:30 pm

See reverse for conditions. Overdue accounts charged 19.56% per annum (1.5 per month)

**COMMERCIAL**  
TRUCK EQUIPMENT CO.

9475 192 Street  
Surrey, BC V4N 3R7  
Ph: 604-888-0513  
Fax: 604-888-1036

11199-48th Street SE  
Calgary, AB T2C 5H4  
Ph: 403-253-6421  
Fax: 403-253-1873

9111-41 Ave.  
Edmonton, AB T6E 6M5  
Ph: 780-468-5151  
Fax: 780-468-1565

1155 MacKay Street  
Regina, SK S4N 4X9  
Ph: 306-721-9575  
Fax: 306-721-2214

GST #83835 2052RT001

Subtotal	240.08
Freight	0.00
GST/HST	12.00
PROV TAX	16.81
Order total	268.89
Amount paid	0.00
<b>AMOUNT DUE</b>	<b>268.89</b>

TERMS: NET30 DAYS



## Certificate of Conformity

To; Dart Aero Space

This is to certify that the cable(s) listed on your purchase order 23187, conforms to Cablecraft manufacturing specifications as produced by Commercial Truck Equipment Co., under license from Tuthill Corp. (Cablecraft)